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o a collection of information unless it displays a valid OMP control purples

Substitute for Form PTO-875  CLAIMS AS FILED – PART I  (Column 1) (Column 2) SMALL ENTITY							OTHER THAN OR SMALL ENTITY		
***************************************		(Column 1)	(Co	olumn 2)	SWALL	1	1	SWALL	ENIIII
FOR	N	UMBER FILED	NUMBI	NUMBER EXTRA		FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))						\$	OR		\$
TOTAL CLAIMS (37 CFR 1.16(c))		minus 20 = •			x \$=		OR	x s=	
INDEPENDENT (37 CFR 1.16(b))	CLAIMS	minus 3			x \$=		OR	x \$ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+\$ =		OR	+\$ =	
* If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL	<u> </u>	OR	TOTAL	
126/1	CLAIMS AS		- PART II (Column 2)	(Column 3)	SMALL E	ENTITY	OR		R THAN ENTITY
ENTA	CLAIMS REMAINII AFTER AMENDME	NG NG	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADD TION
(37 CFR 1.16		Minus	(1)		x \$=		OR	X \$=	
Z Independer (37 CFR 1,16	t b))	Minus	2	-	x \$	·	OR	x \$=	
FIRST PRE	SENTATION OF MU	LTIPLE DEPENDE	ENT CLATH 37 CF	R 1.16(d))	+ \$/=		OR ,	+\$ /.=	
,		<u> </u>		<del></del>	TOTAL ADD'L FEE		OR ,	TOTAL 'S ADD'L FEE	
	(Column 1	<u> </u>	(Column 2)	(Column 3)					
B ENT	CLAIMS REMAININ AFTER AMENDME	1G	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI TIONA . FEE
Total (37 CFR 1,16	c))	Minus	**	=	x s=		OR	x \$=	
Total (37 CFR 1.16) Z Independer (37 CFR 1.16)	t b))	Minus	***	=	x \$=		OR	x \$=	
FIRST PRE	SENTATION OF MU	LTIPLE DEPENDE	ENT CLAIM (37 CF	R 1.16(d))	+\$ =		OR	+ \$ =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	(Column 1	1)	(Column 2)	(Column 3)					
O Hotel	CLAIMS REMAININ AFTER AMENDME	√G	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI TIONA FEE
> Total	c))	Minus	••	=	x \$=		OR	x \$=	
(37 CFR 1,16)		Minus	***	=	x \$=		OR	x \$=	·
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ =		OR	+ \$ =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
** If the "Hig	vin column 1 is les nest Number Previ lest Number Previ	iously Paid For	IN THIS SPACE	is less than 20, e	:nter "20".	<u>.                                    </u>	•		<u> </u>

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO HOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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